PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10812956

		CLAIMS A			<u> (</u>							
TOTAL CLAIMS				(Column 1)		(Column 2)		SMALL TYPE	ENTITY	OF		R THAN LENTITY
TOTAL CLAIMS				23				RATE	FEE	7.	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.0	OF	BASIC FE	770.00
TOTAL CHARGEABLE CLAIMS			23 minus 20=		• 3			X\$ 9=		OF	X\$18=	54
INDEPENDENT CLAIMS				minus 3 =		0.		X43=		OF	X86=	
L	ULTIPLE DEPE	ENDENT CLAIM F	PRESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	824
CLAIMS AS AMENDED - PART II											OTHER	THAN
	-5-6	(Column 1)	(Column 2) (Column 3)					SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 22	Minus	- 2	3	=		X\$ 9=		OR	X\$18=	
MA	Independent	• / ENTATION OF M	Minus	PENDENT	./	- [-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290 =	
								TOTAL	<u> </u>		TOTAL	
		(Column 1)		(Colum	n 21	(Column 3)	A	DDIT. FEE	L	.	ADDIT. FEE	
8		CLAIMS		HIGHE	ST	(Column 3)	Г		ADDI-	3 !		400
AMENDMENT		REMAINING AFTER AMENDMENT		PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18 ≈	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Independent	* NTATION OF MU	Minus	PENDENT	1 634	=	Γ	X43= ·		OR	X86=	
			em er ber	LIVELIVI	, DAILWI	<u>· </u>	Γ	+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)	•	(Column	r 2)	(Column 3)		DII. PEE 4		' . <i>'</i>	······································	
5	`	CLAIMS REMAINING		HIGHES	31		_		ADDI-	r		ADDI-
_ :		. AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL FEE	İ	RATE	TIONAL
CNOMEN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	FEE
	Independent	•	Minus		·	=	\vdash			·		
<u> </u>	FIRȘT PRESEI	NTATION OF MUI	TIPLE DEP	PLE DEPENDENT CL		AIM .		X43=		OR	X86=	
+145= +145=										OR L	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE TOTAL ADDIT. FEE										OR A	TOTAL DDIT. FEE	
Tr	ne *Highest Numt	per Previously Paid	For (Total or	independent)	is the h	ighest number (ound	in the appr	opriate box	in cotu	Mn 1.	· . .
	•			•		_		•	•	• •	•	. [